Clerk of the House of Representatives
Legislative Resource Center
B-106 Cannon Building
Washington, DC 20515

Secretary of the Senate
Office of Public Records
232 Hart Building
Washington, DC 20510

## **LOBBYING REPORT**

Lobbying Disclosure Act of 1995 (Section 5) - All Filers Are Required to Complete This Page

| Lobolying Disclosure Act of 1993 (Section 3) - All Files  | The Required to complete   |                             |  |  |
|---|--|-----------------------------|--|--|
| 1. Registrant name Organization Individual  |  |                             |  |  |
| Organization The Gallatin Group   |  |                             |  |  |
| 2. Address Check if different than previously reported  |  |                             |  |  |
| Addressl 400 N. Capitol St  | Address 2 Suite 585  |                             |  |  |
| City Washington State D   | C Zip Code 20001   | Country USA                 |  |  |
| 3. Principal place of business (if different than line 2)   |  |                             |  |  |
| City State City State/Zi  | Zip Code<br>p or Country   | Country                     |  |  |
| 4a. Contact Name b. Telephone number<br>Prefix Full Name  | c. E-mail  | 5. Senate ID#               |  |  |
| Ms. Samantha Benton (202) 220-1355 sbent  | on@gallatingroup.com   |                             |  |  |
| 7. Client Name Self   |  | 6. House ID #               |  |  |
| Confederated Tribes of the Grand Ronde of Oregon  |  | 32408029                    |  |  |
| TYPE OF REPORT       8. Year       2005       Midyear (January 1-June 30)       OR       Year End (July 1-December 31)         9. Check if this filing amends a previously filed version of this report       □         10. Check if this is a Termination Report       □       Termination Date       □         11. No Lobbying Activity       □ |  |                             |  |  |
| <b>INCOME OR EXPENSES</b> - Complete Either Line 1:   | 2 OR Line 13   |                             |  |  |
| 12. Lobbying Firms  | 13. Organ  | izations                    |  |  |
| <b>INCOME</b> relating to lobbying activities for this reporting period was:  | <b>EXPENSES</b> relating to lobbying activities for this reporting period were:  |                             |  |  |
| Less than \$10,000  | Less than \$10,000   |                             |  |  |
| \$10,000 or more \$ 60,000  | \$10,000 or more   |                             |  |  |
| Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income from the client (including all   | <b>14. REPORTING METHOD.</b> Check box to indicate expense accounting method. See instructions for description of options. |                             |  |  |
| payments to the registrant by any other entity for lobbying   | ■ <b>Method A.</b> Reporting amounts using LDA definitions only  |                             |  |  |
| activities on behalf of the client).  | Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code  |                             |  |  |
|   | Method C. Reporting amounts under section 162(e) of the Internal Revenue Code  |                             |  |  |
|   | i I  | Edit Form > Form Complete > |  |  |
|   | Senate Password  | File with Senate >          |  |  |
| Signature  Samantha M Benton  Digitally signed by Samantha M Benton Digitally signed by Samantha M Benton CP Samantha M Benton, CP US, OP DIST Act Individual Samantha M Benton, CP US, OP DIST Act Date: 2006.02.10 16:31:30-05007   | es Unaffiliated Date2/10/200   | 6                           |  |  |
| Printed Name and Title Samantha Benton, Associate   |  |                             |  |  |
| LD-2DS (Rev. 4.06)  |  |                             |  |  |

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|------|------|------|

| Registrant Name The Gallatin Group  | Client Name Confederated Tribes of the Grand Ronde of   |
|---|---|
|   | ecessary to reflect the general issue areas in which the registrant eporting period. Using a separate page for each code, provide needed. |
| 15. General issue area code GAM - Gaming/Gambling/C                             | Casino (one per page)   |
| 16. Specific lobbying issues  | Add page to continue specific issues description for this issue   |
| Tribal Gaming   |   |
| 17. House(s) of Congress and Federal agencies contact                           | ed Check if None  |
| House, Senate, Interior  18. Name of each individual who acted as a lobbyist in | this issue area  Add a page to continue additing lobbyists for this issue   |
| Name  | Covered Official Position (if applicable)  New  |
| First Name Last Name Suffix Will Hollier  |   |
| Zak Andersen  | Chief of Staff, Senator Max Baucus  |
| Samantha Benton   |   |
| Dan Lavey   |   |
| Kent Craford  |   |
| Katie Wilson  | VP Advance Office   |
|   |   |
| 19. Interest of each foreign entity in the specific issues                      | listed on line 16 above   |
| Signature   | Date 2/10/2006 Add a page for a different issue   |
| Printed Name and Title Samantha Benton, Associa                                 | ıte   |
| LD-2DS (Rev. 4.06)  | Page <u>2</u> of <u>4</u>   |

| ete | this | page |
|-----|------|------|

| Registrant Name The Gallatin Group  | Client Name Confederated Tribes of the Grand Ronde of Oregon  |
|---|---|
|   | necessary to reflect the general issue areas in which the registrant reporting period. <b>Using a separate page for each code</b> , provide |
| 15. General issue area code IND - Indian/Native Americ                        | can Affairs (one per page)  |
| 16. Specific lobbying issues  | Add page to continue specific issues description for this issue   |
| Tribal Issues   |   |
| 17. House(s) of Congress and Federal agencies contact House, Senate, Interior |   |
|   | n this issue area Add a page to continue additing lobbyists for this issue  |
| Name First Name Last Name Suffix Will Hollier                                 | Covered Official Position (if applicable)  New  |
| Zak Andersen  | Chief of Staff, Senator Max Baucus  |
| Samantha Benton   |   |
| Dan Lavey   |   |
| Kent Craford  |   |
| Katie Wilson  | VP Advance Office   |
| 19. Interest of each foreign entity in the specific issues                    |   |
| Signature   | Add a page for a different issue > Date   |
| Printed Name and Title Samantha Benton, Associa                               | ate   |
| LD-2DS (Rev. 4.06)  |   |

D-2DS (Rev. 4.06)

| Registrant Name The G                        | allatin Group            |                                  | Client Name Confederated Tribes of the Grand Ronde of Oregon |  |                 |                               |                      |
|--|--------------------------|----------------------------------|--|--|-----------------|-------------------------------|----------------------|
| Information Upo                              | late Page -              | Complete ONLY w                  | here reg   | istration inf                              | ormation ha     | s changed                     | •                    |
| 20. Client new address Address               | S                        |                                  |  |  |                 |                               |                      |
| City   |                          |                                  | State  | Zip Co                                     | ode             | Country                       |                      |
| 21. Client new princip                       | oal place of busi        | ness (if different than lin      | e 20)  |  |                 |                               |                      |
| City   |                          | State/Zip                        | State  | Zip Co                                     | de              | Country                       |                      |
| 22. New general descri                       | ription of client        | 's business or activities        |  |  |                 |                               |                      |
| First Name                                   | reviously repor          | rted individual who is I         | no longer  | expected to a                              | ct as a lobbyis |                               | ent<br>Suffix        |
| 1 Samantha                                   | Benton                   |                                  | 3  |  |                 |                               |                      |
| 2  |                          |                                  | 4  |  |                 |                               |                      |
| ISSUE UPDATE                                 |                          |                                  |  |  |                 |                               |                      |
| 24. General lobbying                         | g issues that <b>n</b> o | o <b>longer</b> pertain          |  | Find the code                              | to select belo  | W.                            |                      |
| <b>- - - - - - - - - - -</b>                 | 5 100000 11100 12        | o romger personn                 |  |  |                 |                               |                      |
| <b>AFFILIATED OF</b> 25. Add the following   |                          |                                  |  |  |                 |                               |                      |
| Name   |                          | I                                | Address  |  | Princi          | pal place of Bu               | siness               |
|  |                          |                                  |  | (city and state or country)                |                 |                               |                      |
|  |                          | Address                          |  |  | City            |                               |                      |
|  |                          | C/S/Z                            |  |  | State           | Count                         | ry                   |
|  |                          | Address<br>C/S/Z                 |  |  | City<br>State   | Count                         | rv                   |
| 26 Name of each no                           |                          |                                  | . ma lamas   | on officer days                            |                 |                               | 1 <i>y</i>           |
| •  | eviousiy repoi           | ted organization that is         | s no longe   | _  | _               | nt or client                  |                      |
| 1  |                          | 2                                |  |  | 3               |                               |                      |
| FOREIGN ENTI                                 |                          |                                  |  |  |                 |                               |                      |
| 27. Add the followin                         | ig foreign entit         |                                  | D  | 1 1 (1 '                                   |                 |                               | Ownership            |
| Name   | Street Address<br>City   | G: . 70 :                        |  | l place of business<br>d state or country) |                 | contribution<br>ng activities | percentage in client |
|  |                          |                                  | City   |  |                 |                               |                      |
|  |                          |                                  | State  | Country                                    |                 |                               | %                    |
| 20.37  |                          |                                  |  |  |                 |                               | 11                   |
| 28. Name of each prevaffiliated organization |                          | foreign entity that <b>no lo</b> | <b>nger</b> owns   | , <u>or</u> controls, <u>or</u>            | s affiliated w  | th the registr                | ant, client or       |
| 1  |                          | 3                                |  |  | 5               |                               |                      |
| <u> </u>                                     |                          | 4                                |  |  | 6               |                               |                      |
| [2]  |                          | Ŀ                                |  |  |                 | ld a page for m               | nore undates         |
| Signature                                    |                          |                                  |  | _ Date                                     | 2/10/2006       | a paye ioi ii                 |                      |
| Printed Name and Titl                        | e Samanth                | a Benton, Associate              |  | <del> </del>                               |                 |                               |                      |
| . D. and and                                 |                          |                                  |  |  |                 |                               |                      |